



With all of us in mind

Minutes of the Members' Council meeting held on 29 April 2015

Present:	Marios Adamou Ian Black Stephen Baines Jackie Craven Andrew Crossley Adrian Deakin Michael Fenton Claire Girvan Nasim Hasnie John Haworth Andrew Hill Ruth Mason Bob Mortimer Cath O'Halloran Jules Preston Daniel Redmond Jeremy Smith Michael Smith Hazel Walker Peter Walker Tony Wilkinson	Staff – Medicine and pharmacy Chair of the Trust Appointed – Calderdale Council Public – Wakefield Public – Barnsley Staff – Nursing Public – Kirklees Staff – Allied Health Professionals Public – Kirklees Staff – Non-clinical support Public – Barnsley Appointed – Calderdale and Huddersfield NHS Foundation Trust Public – Kirklees Appointed – University of Huddersfield Appointed – Mid Yorkshire Hospitals NHS Trust Public – Calderdale Public – Kirklees Public – Calderdale Public – Wakefield Public – Wakefield Public – Calderdale (Lead Governor)
In attendance:	Adrian Berry Tim Breedon Laurence Campbell Nette Carder Bernie Cherriman-Sykes Alan Davis Alex Farrell Julie Fox Chris Hollins Carol Irving Steven Michael Sean Rayner Diane Smith Dawn Stephenson Karen Taylor	Medical Director Director of Nursing, Clinical Governance and Safety Non-Executive Director Interim District Service Director, CAMHS and forensic services Integrated Governance Manager (author) Director of Human Resources and Workforce Development Deputy Chief Executive/Director of Finance Non-Executive Director Public – Wakefield (designate) Member of the public Chief Executive District Service Director, Barnsley and Wakefield Director of Health Intelligence and Innovation Director of Corporate Development District Service Director, Calderdale, Kirklees and Specialist Services
Apologies:	Jean Askew Hilary Brearley Garry Brownbridge Doug Dale Netty Edwards Robert Klaasen Manvir Manku Margaret Morgan Kevan Riggett David Woodhead	Appointed – Wakefield Council Appointed – Barnsley Hospital NHS Foundation Trust Staff – Psychological Therapies Public – Wakefield Staff – Nursing support Public – Wakefield Appointed – staff side organisations Appointed – Barnsley Council Public – Barnsley Public - Kirklees

MC/15/10 Welcome, introduction and apologies (agenda item 1)

Ian Black, Chair of the Trust, welcomed everyone to the meeting. He particularly welcomed new and returning governors and bade farewell to those standing down. He also marked the retirement of Peter Aspinall as a Non-Executive Director of the Trust. He commented that

he would be much missed and acknowledged his contribution to the Trust. This was wholeheartedly endorsed by the Members' Council.

MC/15/11 Declaration of interests (agenda item 2)

The Members' Council **NOTED** the individual declarations made as part of the annual declaration exercise and **CONFIRMED** the changes to the Register of Interests as set out in the paper.

MC/15/12 Minutes of the previous meeting held on 30 January 2015 and the notes from the joint meeting with Trust Board held on 30 January 2015 (agenda item 3)

The Members' Council **APPROVED** the minutes from the meeting held on 30 January 2015. The action points were noted and there were no matters arising. The Members' Council noted the notes from the joint meeting with Trust Board on the same day.

MC/15/13 Chair's report and feedback from Trust Board/Chief Executive's comments (agenda item 4)

Ian Black began his remarks by commenting that one of his personal objectives for the coming year is to adopt a higher profile nationally. To support this, he is standing for election to the Board of NHS Providers. He went on to make the following points.

- Child and adolescent mental health services (CAMHS) in Calderdale and Kirklees are a key risk for the Trust and scrutiny is a standing item on both Trust Board and Clinical Governance and Clinical Safety Committee agendas. At the request of the Members' Council Co-ordination Group, CAMHS forms the topic for group discussion later on the agenda.
- On the matter of the forthcoming General Election, Trust plans continue to be relevant and important no matter who wins. Trust Board will review the outcome and implications for the Trust.
- Following the Dalton Review and the focus on integration of services, new models of care are being discussed at a local level. In January 2015, the NHS invited individual organisations and partnerships to apply to become 'vanguard' sites for the New Care Models Programme, one of the first steps towards delivering the NHS Five Year Forward View and supporting improvement and integration of services. More than 260 individual organisations and health and social care partnerships expressed an interest in developing a model in one of the areas of care, with the aim of transforming how care is delivered locally. In March, the first wave of 29 vanguard sites were chosen, following a rigorous process, involving workshops and the engagement of key partners and patient representative groups. Each vanguard site will take a lead on the development new care models, which will act as the blueprints for the NHS moving forward and the inspiration to the rest of the health and care system.

Of the 29 sites chosen, three are in the Trust's area (two in Wakefield and one in Calderdale) and the Trust is involved in all three projects. This is a welcome development; however, the Trust is adopting a cautious approach with the key aim of influencing the role and position of mental health and models of service to ensure services are not marginalised. Bob Mortimer asked whether the Trust was aware of the quality of services it would be referring individuals to in an integrated service. Steven Michael responded that this is a huge challenge and the key will be to foster safe pathways with sensible interfaces between all providers. Nasim Hasnie asked if the approach/model had been tested as partnership is not always the best solution. Alex

Farrell responded that one question to be asked is how 'scaleable' models and approaches can be and how they could be adopted on a wider footprint. Ian Black suggested an update on the outcome of the pilots at a future meeting.

Steven Michael went on to comment on the following.

- The process for re-procurement of community services in Kirklees continues. The Trust is working with Locala, the Community Interest Company currently providing community services in Kirklees, on a joint bid. The outcome will be known at the end of May. He confirmed that Calderdale and Huddersfield NHS Foundation Trust is working on a bid with Mid-Yorkshire Hospitals NHS Trust.
- The Trust's transformation programme is entering a critical phase as work begins at team and service level. Trust plans are aligned to those of commissioners.
- He ended by saying that he has been appointed as Chair of the Mental Health Network of the NHS Confederation for a period of three years.

Ian Black ended by mentioning that the Trust has established a customer experience group and would like to invite a governor to be involved. *[It should be noted that Jackie Craven, publicly elected Governor for Wakefield, put herself forward and will join the group.]*

MC/15/14 Performance report Quarter 4 2014/15 (agenda item 5)

Alex Farrell took the Members' Council through the key highlights from the quarter 4 report and the performance dashboard. The full report can be found on the Trust's website.

Andrew Hill asked if there were processes in place to charge people who use Trust services if they are not entitled to free care. Alex Farrell responded that the Department of Health issues guidance to Trusts; however, this is very rare for this Trust's services.

Michael Smith asked whether there were any compulsory redundancies included in the cost improvement programme in the last twelve months. Alan Davis responded that none were included in the programme but those that were made were aimed at reducing management costs not front-line staffing. Alex Farrell added that the Trust reviews each vacancy as it arises and there were about 30 posts during the year where a decision was taken not to recruit or to move people from other posts to fill the vacancy. The Trust works to minimise the numbers to be made redundant.

Alex Farrell was also asked why early intervention in psychosis performance was so high and she responded that the target is out-of-date and will be reviewed next year. She also commented that internal audit has been commissioned to review a series of indicators through the Audit Committee and this is one area where new guidance has been received and the number will come down.

Ian Black commented that all cost improvements and savings are subject to a robust quality impact assessment. Tim Breedon added that the process helps to understand the impact on quality within a service and each proposal is rated and presented by staff who work in that service. This is followed by a series of peer and professional reviews ending with a challenge session before a quality impact rating is agreed. If the cost improvement is too risky or unsafe, it will not be implemented. All cost improvements are then reviewed from a whole system point of view. Ian Black added that Trust Board will monitor and seek assurance on investment, both capital and revenue, in the coming year with the same rigour as it assesses cost savings.

Tony Wilkinson asked whether staff numbers in clinical and nursing posts were increasing or decreasing. Alan Davis responded that they are increasing due to the major investment in

safer staffing, particularly in in-patient areas. Tony Wilkinson also asked if there were any staff on zero hours contracts to which Alan Davis responded that there are not as such but the definition would apply to bank staff as there is no guarantee that an individual will be asked to work. If an individual on the bank is required on a longer-term basis, they would be given a temporary contract rather than continuing through bank arrangements.

Marios Adamou asked if the Trust has a 'reserves' policy and what would happen if reserves were seen as 'too high' by commissioners. Ian Black responded that reserves provide for the Trust's future stability and its surplus is invested in services, which is why Trust Board's focus will also be on investment, whether capital or revenue, in 2015/16. The Trust has plans to spend its money and this reflects the prudent way it is using its resources. Alex Farrell added that the Trust has a financial strategy, which includes its approach to reserves and surpluses.

MC/15/15 Annual plan and budgets 2015/16 (agenda item 6)

Alex Farrell took the Members' Council through the key points of the plan and budgets for 2015/16. She explained that Monitor requires a one-year plan with a first draft submitted on 7 April 2015 and a final plan on 14 May 2015. The submission was delayed as a result of the tariff position and an interim position is in place currently. The Trust is also looking at the impact on future years and will take a five-year plan to Trust Board in June 2015.

Key points

- The plan represents a prudent approach with a recurrent surplus but in-year deficit for 2015/16 due to investment in enablers, such as information management and technology, to achieve future years' plan. This represents a £724,000 deficit with a forecast surplus in 2016/17.
- Capital investment of £16 million, which has been reviewed by Trust Board.
- A financial risk rating of 3 or above.
- Efficiency savings of £9.8 million (3.8%).

Michael Smith asked if the plan had gone to Monitor. Alex Farrell responded that the budget was approved by Trust Board in March 2015 and a first draft was submitted to Monitor on 7 April 2015 with a final submission due on 14 May 2015.

MC/15/15 Unannounced visits annual report (agenda item 7)

Tim Breedon presented the annual report of the unannounced/planned visits programme. Ian Black commented that he was keen that governors are included in the programme for 2015/16.

Steven Michael commented that no mental health trust has yet received an outstanding rating from the Care Quality Commission (CQC) but there are some very good trusts.

Daniel Redmond commented that there is a very strong case for retaining paper records. Ian Black responded that he has a different point of view given the concerns about paper records; however, he acknowledged that the quality of Trust data does need to be improved in some areas. Steven Michael added that the move to electronic records can be made quickly but key to any system is effective management.

Claire Girvan asked if there were any plans to involve service users in the programme. Tim Breedon responded that this would be reviewed for 2015/16 and the intention is to utilise expert and experienced service users.

MC/15/16 Children's/child and adolescent mental health services (agenda item 8)

Steven Michael provided an introduction to the discussion item for this meeting and commented that there are concerns nationally about the provision of CAMHS across all political parties with an intention to increase funding. As a provider, the Trust took the decision it wanted to be involved in providing these services and now does so across all four districts. Services are provided at four levels as explained in the paper and the Trust provides Tier 3 services in Calderdale, Kirklees, Barnsley and Wakefield (specialist multi-disciplinary outpatient teams providing a specialised service for severe, complex and persistent disorders).

In the last two years, the Trust has provided Tier 3 services in Calderdale and Kirklees following a tender exercise. This has turned out to be a bigger challenge than the Trust original anticipated on taking on the services. An additional £500,000 has been invested above the contract value to support services. In Wakefield, the Trust encountered similar problems on taking on the services in 2011 but there has been a better level of investment and the service has now been turned round. In Barnsley in April 2013, children's services were transferred to the Trust from Barnsley Council. The current position in Calderdale and Kirklees represents a continued pressure on the Trust to continue to deliver a safe level of provision.

Steven Michael went on to outline the development of Tier 4 CAMHS. The Trust recognised the lack of provision at this level in Yorkshire and the Humber and was approached by Priory Group to work in partnership to develop Tier 4 services forming a joint venture to provide a 32-bedded unit on the Castleford, Normanton and District Hospital site. This provides the Trust will the opportunity to manage the pathway and access at this level and provide a future legacy on the hospital site.

Governors divided into discussion groups covering their own 'district' and also the Tier 4 development. For their own districts, governors were asked to consider what questions the issues raised, particularly in the context of the Trust's values and quality priorities. For the Tier 4 discussion, Governors were briefed on the development and asked to consider the benefits such a development brings the Trust and how it demonstrates the ability of the Trust to reflect and adapt to local service needs.

MC/15/17 Trust museum (agenda item 9)

The Members' Council received a presentation from Cara Sutherland, Museum Curator. Many governors had taken the opportunity to visit the museum prior to the meeting.

MC/15/18 Members' Council business items (agenda item 10)

Non-Executive Director appointments (agenda item 10.1)

In introducing this item, Ian Black commented that the panel had seen three excellent candidates, all of whom would bring skills, experience and expertise in areas that would add value and enhance Trust Board. As the Constitution allows for an additional Non-Executive Director, the interview panel asked the Nominations Committee to consider the appointment of three new Non-Executive Directors given the challenge and volume of work currently. As a result, the Nominations Committee was recommending the appointment of Charlotte Dyson from 1 May 2015, Chris Jones from 1 August 2015 and Rachel Court from either 1 September or 1 October 2015. Michael Smith, who was on the interview panel, added that all three will add value to Trust Board going forward and commended their appointment.

The Members' Council APPROVED the recommendation from the Nominations Committee to appoint Charlotte Dyson from 1 May 2015, Chris Jones from 1 August 2015 and Rachel Court from September/October 2015, each for a period of three years.

Appointment of Deputy Chair/Senior Independent Director (agenda item 10.2)

Julie Fox left the meeting for this item.

The Members' Council APPROVED the recommendation from the Nominations Committee to appoint Julie Fox as Deputy Chair/Senior Independent Director from 1 August 2015 to 31 July 2017.

Members' Council elections (agenda item 10.3)

The Members' Council NOTED the paper.

Dawn Stephenson explained the position in relation to the election for a governor to represent staff in the allied health professional class. Due to an administrative error, Electoral Reform Services advised that the election should be re-run. The election will now close on 28 May 2015.

Lead Governor appointment (agenda item 10.4)

Michael Smith left the meeting for this item.

On behalf of the Members' Council, Ian Black thanked Tony Wilkinson for his support and wise counsel throughout his term as Lead Governor. He often offered a different perspective to his views as Chair, which provided challenge and food for thought.

Following a process managed by the Nominations Committee, one self-nomination was received.

The Members' Council APPROVED the recommendation from the Nominations Committee to appoint Michael Smith as Lead Governor for a period of two years, subject to his re-election as a governor in 2016, from 1 May 2015 to 30 April 2017 with the option to extend the appointment for a further year to 30 April 2018.

Governor reviews with the Chair (agenda item 10.5)

The Chair commented that he found this process, undertaken annually, really useful and that it provides a good review of what Governors are thinking and what they are concerned about. Generally, Governors welcomed the strong attendance by Non-Executive and Executive Directors at meetings, which demonstrates how the Trust values the Members' Council's contribution. Governors were much better prepared for the reviews this year and had given real thought to their contribution and future contribution. He thanked all governors who participated and hoped they also thought the process was worthwhile.

Chair's appraisal (agenda item 10.6)

Ian Black left the meeting for this item.

Julie Fox presented this item on behalf of Helen Wollaston, Deputy Chair. **The Members' Council RECEIVED the report on the Chair's appraisal.**

Monitor well-led framework for governance reviews (agenda item 10.7)

Ian Black began by saying that Trust Board had decided to undertake the independent review at this time, which provides an objective view of the Trust's governance arrangements. Trust Board undertook a self-assessment the previous day and the review will include a session with Governors and an interview with the Lead Governor. Dawn Stephenson added that the review will support the Trust to move from good to excellent and will be a developmental but challenging journey focussing on improvement. The review will

result in a number of recommendations from which Trust Board will develop an action plan, which will be shared with the Members' Council and with Monitor.

MC/15/19 Date of next meeting (agenda item 11)

The next meeting will be held in the morning of Friday 24 July 2015 in the Legends Suite, Oakwell Stadium, Barnsley Football Club, Grove Street, Barnsley, S71 1ET.

Signed **Date**